

Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date: 07/26/07

Address: 425 S @ Middle James Rd

Case #: 52F43812

Lebanon, IN 46052

County: Boone

Type of Laboratory Seizure (check one)

- ☐ Operational Lab
☒ Chemical/Glassware/Equipment (only)
☐ Dumpsite (only)

Seizure Location (check all that apply)

- ☐ Residence
☐ Outbuilding
☒ Vehicle
☐ Hotel/Motel
☐ Open - No Structure
☐ Other:

Items Found: Location (bedroom, kitchen, open air, etc)

(check all that apply)

- ☐ Lithium/Ammonia Reaction(s): ____
☐ Red Phosphorous/Iodine Reaction(s): ____
☒ Flammable Solvents: One Gallon
☐ Water Reactive Metal (Lithium): ____
☒ Anhydrous Ammonia: Trace
☐ Hydrochloric Acid Gas Generator(s): ____
☐ Corrosive Acid: ____
☐ Corrosive Base: ____
☒ Other (item and location): Sodium Chloride

Child under age 18 discovered (check one)

- ☐ Yes ____ (number present)
☒ No

*If yes, fax report to Child Protective Services

Investigative Information

- ☐ Ephedrine/Pseudoephedrine Tracking Log
☐ Retail/Merchant Tip
☒ Other: Traffic Stop

This report is to be faxed to the following agencies that serve the location:

Fire Department: Linton Union VFD

Fax: (317) 994-5400

Health Department: Boone Health

Fax: (765) 483-4450

Child Protection Service: ____

Fax: ____

For further information regarding this methamphetamine laboratory, contact

Investigating Officer: Tom Egler

Phone 317 234-4591

** This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

*** This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.